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CONFIRMATION NO. 5191

<b>SERIAL NUMBER</b> 10/525,373	<b>FILING OR 371(c) DATE</b> 01/17/2006 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 09401.0004	
<b>APPLICANTS</b> Vladimir Sheiman, New South Wales, AUSTRALIA;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU03/01079 08/23/2003					
<b>** FOREIGN APPLICATIONS *****</b> AUSTRALIA 2002950965 08/23/2002 AUSTRALIA 2002953039 12/02/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 22852					
<b>TITLE</b> Nebulizing and drug delivery device					
<b>FILING FEE RECEIVED</b> 2890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		